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ABSTRACT

Six issues are discussed concerning the provision of services to preschool children with severe behavior disorders, in order to initiate an examination of needs for policy, services, and training. The issues, which are presented in the form of questions, include: how to define the population of preschool children with severe behavior disorders, what are the needs of the population, how can practitioners best serve these students, what are valid intervention approaches, how can the students be tracked longitudinally, and what type of training and certification should be developed for those working with preschool children with severe behavior disorders. A call for action recommends that professionals in the field address the area of preschool children by holding conferences, creating inter-organizational task forces, and influencing the state licensure/certification process. (JDD)

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Questions and Directions Related to the Provision of Services to Preschool Children with Severe Behavior Disorders

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Running head: QUESTIONS AND DIRECTIONS

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Abstract

The provision of appropriate educational services and interventions to preschool children with behavior disordered is a relatively new challenge facing the field of behavior disorders. Six questions concerning the provision of services to students with severe behavior disorders are provided. These include how to define the population, what are the needs of the population, how can we best serve these students, what are valid interventions approaches, how can we longitudinally track these students, and what type of training and certification should be develop for professionals who work with preschool children who are severely behavior disordered. A number of directions for answering these questions is put forth. Finally a call for action for the next decade is expressed.

Questions and Directions Related to the Provision of Services to Preschool Children with Severe Behavior Disorders

The provision of services to special needs children from birth to six years old and to their families has been required by PL 94-142 and PL 99-457. Both federal mandates considerably expand the populations eligible for educational and social services. The change in the legal recognition of these special needs children has been accompanied by significant changes occurring in the fundamental structure and social role of the American family. For example since the early 1970's, the number of single parent families has grown markedly; the number of two-parent working families has substantially increased, and the extended family has become more of a concept than a reality. Paralleling these basic structural family changes, are equally important economic changes impacting children. The year 1988 has become the first year that more children lived in poverty than elderly adults. The full impact of this very fundamental restructuring of our society has not been completely analyzed, however the stress of reduced parental and economic support has placed a higher percentage of children at risk than in previous decades.

The preschool severe behavior disorders population has shown notable growth during this same period (Florida Mental Health Institute, 1986). There has, however been no commensurate growth in research or even awareness of this group of handicapped children within the educational system. The professional literature has shown that older behavior disordered children and adolescents exhibit indicators of potential behavior problems at very young ages (Griffin, 1987; Spivack, Marcus and Swift, 1986; Stevenson, Richman and Graham, 1985) and that behavior disorders are present in very young children (Thomas and Chess, 1984; Maselli, Brown, Veaco, 1984). However until very recently the preschool severe behavior disorders child received little recognition by the profession and available services were limited. Although preliminary discussions have been

offered by a few groups. (i.e., Council for Children with Behavior Disorders) the journals and text books are virtually devoid of discussion of the early childhood population. The primary focus of services and the body of research that is currently effecting practice and program evaluation has been based on older children and adolescents. Much of the research that does address early problems has been based on retrospective examinations of older identified students (i.e., Griffin, 1987; Spivack, Marcus and Swift, 1986; Stevenson, Richman and Graham, 1985). The validity of these approaches emanating from research with older children must be questioned.

Review of the children currently being served in severe behavior disorders preschool classrooms seems to indicate that young children vary in several respects from their adolescent counterparts being served under the same label. There is however a body of knowledge that has been developed through the mental health system which indicates that younger children require different approaches (Stroul and Friedman, 1980). The children served in the preschool rooms appear to have suffered from higher levels of overt abuse and have a wide diversity or needs. Also there is some evidence that behavior disordered children are under referred for services (Walker, Bettes, and Ceci, 1984; Swan, Purvis and Wood, 1986).

Understanding that very little is actually known in the educational system about early childhood severe behavior disorders, coupled with the clear recognition of the growing needs of this population, agencies and schools have begun to develop programs to serve children with severe behavior disorders. The field of behavior disorders is having to meet the challenges posed by this newly recognized population with precious little research about these very involved and needy children. In these initial stages of development, the educational services and programs currently being offered can be characterized as diverse in orientation, multi-directional and non-comprehensive in nature. If the mandates of PL 94-142 and PL 99-457 are to be carried out, providing young children with severe behavior disorders appropriate services, there are a number of

questions that must be addressed and activities that must be undertaken in order to meet the needs of this large and growing group. The remainder of this discussion will focus upon these questions, along with the activities that should be undertaken if we as professionals are to effectively address the needs of severely behaviorally disordered preschool children.

Questions that Need Answers

The questions that follow have been generated from our perspective and are not meant to be exhaustive. They are provided to form a basis for initiating an examination of needs by those responsible for development of policy, services and training.

Question I: What defines the severe behavior disorders preschool population?

PL 99-457 currently mandates that states develop definitions of populations eligible for service. There is considerable variance in the approaches taken by the individual states. One trend appearing is the use of broad, definitional categories, i.e., children and families at risk or developmentally delayed or fragile. This generic approach is counter to the more categorical approach used in the K-12 regulations of PL 94-142. Is a broad categorical approach the most effective approach to providing services to the most severely involved preschool children? We really do not know, because no systematic evaluation of the population being served has been conducted, even on a statewide basis.

Furthermore, as with the youth and adolescents presently served, there are definitely some children within the population who need significantly more intensive services that many of their peers with the same label. Whether differentiation of preschool behavior disorders is necessary needs to be examined. The differentiation of behavior disorders and severe behavior disorders may be a necessary approach for the young children receiving service. Perhaps the mild, moderate and severe classification system that exists in the field of mental retardation could be applied to very young children with behavior disorders. However, if the question of

definition is to be answered and if appropriate services are to be linked to specific children, it does appear some sort of differentiation needs to be made.

Question 2: What are the needs of the preschool severe behavior disorders population?

The limited information that we can gather on effective classroom programs (classes that lead to a high rate of placement and maintenance in less restrictive special education or regular education classrooms) seems to provide initial indications about the needs of the population of children and families. These programs are multi-disciplinary in providing direct services to the student; family involvement in the change process; child and family support with access to a variety of community services; and varied intervention approaches when dealing with the child (i.e., Baenen, et.al., 1986; Scruggs, et.al., 1986, Soderman, 1985; Plenk 1978). Furthermore, the more effective programs dealing with severe behavior disorders preschool children usually work with the child and the family from the age of 18 to 36 months and provide muti-faceted treatment (Stroul and Friedman, 1986). Although these are only initial indicators, they do point to the needs of the severe behavior disorders child. We must start detailed examinations of the the children being served. This data gathering must have a broader focus than just the classroom. It should be ecologic in perspective.

Question 3: How can we best service the severe behavior disorders preschool child?

Although this question and the previous one are closely interrelated, they do focus on somewhat different issues from a perspective of practice. The question of service relates to such problems as: What is the most appropriate service model?; Is there one appropriate model?; What should classrooms look like?; and so forth. We need to rapidly recognize that there is a need for a continuum of services for severe behavior disorders preschool children similar to the need for a continuum of service alternates for the adolescent population. In many locations a new classroom or

level of classroom may need to be established,especially for the intensive treatment classroom. These classrooms would involve multi-disciplinary teams, low student to staff ratios, and ecological approaches (.i.e., Baenen, et.al., 1986;Stroul and Friedman 1986; Soderman, 1985; Plenk 1978) As professionals we need to start defining what best practices are for the preschool severe behavior disorders classroom.

Question 4: What are valid intervention techniques for teaching severe behavior disorders young children?

If the severe behavior disorders preschool child has different needs than the severe behavior disorders adolescent, then it seems logical that some of the established intervention, practices and techniques may not be effective. We have to validate the individual approaches being used in classrooms. For example, some programs are struggling with the issues of the use of restraint with preschool children. It may be that restraint is less necessary, or that the guidelines that have been developed for older students do not hold for preschoolers. Each of our well established practices should undergo examination by both service providers and researchers if we are going to use interventions and techniques safely, appropriately and effectively.

Question 5: How can we longitudinally track severe behavior disorders preschool students?

We need to follow the severe behavior disorders children as they exit preschool programs to gather data to support the effect of treatment. We have had difficulty doing this with severe behavior disorders adolescents, because they exit the system rapidly and in a variety of manners (drop out, suicide, juvenile justice, graduation, etc.). With the preschool child we have the potential to track these children for twelve years or more. It would seem appropriate to develop cost-benefit data, much like that done in other fields (for a discussion and summary to studies in special education see Lewis, Bruininks, Thurlow and McGrew, 1988). There are some early and quite limited indications from programs within our state, that after

exiting intensive, effective intervention programs, severe behavior disorders preschool children can enter regular classrooms. Longitudinal studies could easily demonstrate whether this is a short term phenomenon or a permanent change for children receiving such services.

Question 6: What type of training and certification or licensure should be required for those who work with the severe behavior disorders preschool population?

Although we have still not been unable to define clear and consistent standards for the K-12 service providers on state or national levels, this question needs to be specifically addressed in reference to the preschool population. A recent survey of the various states revealed that prior to the passage of P. L. 99-457 that twenty five percent reported on certification for working with the zero to six population in general (Meisels, Harbin, Modigliani and Olson In Press). Some states have added endorsements or credentials for educational personnel who work with the early childhood population. Washington, for example, has added early childhood special education as a requirement to work with 3 to 5 year old children who are handicapped. However, the question becomes more complex in reference to the severe behavior disorders children when a variety of disciplines and service providers are involved and when contracted services are purchased by districts for the most involved children. Further complicating the issue is the problem of developing standards for those providing services to the under-three-year-old severely behavior disordered child (all other 0-2 year olds with handicaps for that matter). Most states do not have education certification for these high need, young children. Is there a need for a new licensing procedure that would allow social workers, as well as educators, to be classified as instructional providers? Should other fields need licensure to work with severe behavior disorders children and their families?

Perhaps even more fundamental is the question of what sort of training is required for those educating/treating severe behavior disorders young children? Identification of competencies to work

with the severely behavior disordered population similar to those identified for early childhood special education by Linder (1982) and Smith and Powers (1987). These would lead most University behavior disorders programs would have to revise their offerings or add course work to prepare their graduates for entry into the the preschool severe behavior disorders arena. But what are the needed competencies? At present they are not defined. An examination of current service providers' classrooms seems to indicate that these competencies may differ from those of programs for the older severe behavior disorders student. Clearly addressing those preceding questions, focusing on defining the population, identifying the needs and developing effective interventions, will help to identify these competencies. The problem then becomes how long can we wait for the answers, considering the length of time it takes to effect program change at the university level?

A Needed Focus for the 1990's

It seems critical that as individuals and as a profession in total address the questions raised in this discussion and the issues that will arise as we seek answers. It does seem that we need to focus national attention on developing a refined set of questions concerning the young child with severe behavior disorders. It would seem that organizations such as the Council for Children with Behavior Disorders need to internally, systematically address the area of preschool children with severe behavior disorders (which has in fact begun, although in a very preliminary manner). Further, Council for Children with Behavior Disorders should develop a conference addressing the needs of young children with severe behavior disorders which could be similar to the bi-annual adolescent conference with which the organization is associated. Beyond that, within the Council for Exceptional Children, an inter-divisional task force should be formed to begin looking at the preschool severe behavior disorders issues. That task force would, at a minimum, include representatives from Council for Behavior Disorders, Early Childhood Division, Teacher Education Division, , and Research Division.

Beyond this, an inter-organizational task force should be formed to address issues and questions relating to the early childhood severe behavior disorders population. Representatives from organizations representing social work, psychology, special education and parent groups should come together to begin a national, inter-agency dialogue on the provision of effective services to these children.

There is also a need for those of us in the field behavior disorders to become involved in influencing the licensure/certification process within our own states in relationship to young behavior disorders infants and children. One important group that exists in all the states where initial contact should be made, is the planning group (inter-agency councils) required under PL 99-457.

Addressing the questions that have been raised will be a lengthy process (after all we are still addressing questions and issues that were raised more than twenty years ago concerning adolescents with severe behavior disorders). The most fundamental step to be taken is the acceptance in our own minds that there are a large number of young children who are severely behavior disordered and that have an intense set of needs. When that acceptance is achieved, we can proceed with addressing the questions that have been and will continue to be raised

References

Baenen, R. S., Glenwick, D. S., Parris Stephens, M. A., Neuhaus, S. M., Mowrey, J. D. (1986) Predictors of child and family outcome in a psycho-educational day school program. Behavioral Disorders 11, 272-279.

Griffin, G. W. (1987) Childhood predictive characteristics of aggressive adolescents. Exceptional Children, 54, 246-252.

Florida Mental Health Institute (1986) Update: Improving services for emotionally disturbed children. 1,2,1-7.

Lewis D.R., Bruininks, R.H., Thurlow, M. and McGrew, K. (1988) Using benefit-cost analysis in special education. Exceptional Children, 55, 203-214.

Linder, T. (1982) A national study of competencies for early childhood special education. Educational an Psychological Research, 2, 31-42.

Maselli, D., Brown, R., and Veaco, L. (1984) Aggressive behavior of the preschool child. Education, 104, 385-88.

Meisels, S.J., Harbin, G., Modigliani, K., and Olson, K. (In Press) Formulating optimal state early childhood intervention policies. Exceptional Children.

Plenk, A.M. (1978) Activity group therapy for emotionally disturbed pre-school children. Behavior Disorders 3, 210-218.

Scruggs, T.E., Mastropieri, M.A., Cook, S.B. and Escobar, C. (1986) Early intervention for children with conduct disorders: A quantitative synthesis of single-subject research. Behavior Disorders 11, 260-271.

Smith. B.. and Powers. C. (1987) Issues related to develping state certification policies. Topics in Early Childhood Special Education. 7:3. 12-33.

Spivack. G. Marcus. J. and Swift. M. (1986) Early classroom behaviors and later misconduct. Developmental Psychology 22. 124-131.

Soderman. A. K.(1985) Dealing with difficult young children. Young Children 40.5.15-20.

Stevenson. J... Richman. N.. and Graham. P. (1985) Behaviour problems and language abilities at three years and behavioural deviance at eight years. Child Pyschology and Psychiatry 26. 215-230.

Stroul. B.A. and Friedman. R.M. (1986) A system of care for severely emotionally disturbed children and youth Washington. D.C.: National Institute of Mental Health p.44-77.

Swan. W.W.. Purvis. J.W. and Wood. N.J. (1986) A quantitative study of Georgia SED students. Unpublished paper. University of Georgia.

Thomas. A. and Chess. S.(1984) Genesis and evolution of behavioral disorders: From infancy to early adult life. American Journal of Psychiatry 141.1-9.

Walker. E... Bettes. B. and Ceci. S.(1984) Teachers' assumptions regarding the severity. causes. and outcomes of behavioral problems in preschoolers: Implications for referral. Journal of Counsulting and Clinical Psychology. 52. 899-902.